

**Missouri**

**Part C**

**State Performance Plan**

**for**

**2005-2006 through 2010-2011**

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**Overview of the State Performance Plan Development:**

A preliminary draft of the Missouri State Performance Plan (SPP) was developed by the Division of Special Education, based in part on previous Annual Performance Reports to the Office of Special Education Programs (OSEP) which were developed in conjunction with the State Interagency Coordinating Council (SICC). The draft was presented to System Point of Entry (SPOE) directors in Jefferson City on September 8, 2005, and to the State Interagency Coordinating Council (SICC) on September 9, 2005. Based on feedback from these stakeholders, revisions were made and a revised draft of the SPP was posted on the Division's website on October 15, 2005. SPOE/SICC members agreed to disseminate the SPP to larger audiences through Regional and Local Interagency Coordination Council (RICC/LICC) meetings, with comments returned to the Division by November 1. A revised draft was presented to the SICC November 18, 2005, and the final plan will be submitted to OSEP December 2, 2005.

**Public Dissemination and Reporting of Data:**

This State Performance Plan will be posted on the Department's website under the First Steps Data, Reports and Publications link. DESE will report annually to the public on the state's performance compared to the targets established in this SPP. In addition, DESE will report annually to the public on the performance of each System Point of Entry (SPOE). Specifics on the public reporting of data will be addressed under each SPP Indicator. Data for many of the SPP indicators are currently publicly available on the DESE website, and any additional indicators will be added to existing reports.

**Overview of Missouri's Part C System:**

Missouri's Part C system, First Steps, was redesigned with implementation beginning in April 2002 in five SPOE regions. Operations in the remaining 21 SPOEs were implemented in March 2003. The SPOEs were responsible for taking referrals, determining eligibility and developing the initial IFSP. After the initial IFSP meeting for a child, service coordination was handled by an ongoing service coordinator outside of the SPOE. Due to limitations of the original SPOE design, a new contract was implemented in July 2004 which reduced the original five SPOEs to three. This new contract has resulted in significant improvements in child find, timelines and service delivery. A similar contract has just been awarded in the remainder of the state. The new awards were made by the Missouri Office of Administration in late November 2005 and will be operational by February 2006. The 21 SPOEs will be reduced to seven, resulting in ten SPOE regions covering the state.

Under the July 2004 SPOE contract that is in place in three regions of the state (serving approximately half of the state's child count), and soon to be in place in the remainder of the state, SPOE administrators have the following responsibilities:

- Employ and conduct personnel evaluations on service coordinators
- Assure implementation of any corrective action resulting from a complaint decision or monitoring review
- Assist the state agency with investigation of provider complaints
- Collaborate with Division of Mental Health (DMH) Regional Centers to implement the DESE/DMH Interagency Agreement
- Develop, implement, and maintain a system of provider recruitment
- Organize, develop, and appoint a Regional Interagency Coordinating Council (RICC)
- Develop, implement, maintain, and evaluate child find activities
- Monitor the completion of service provider training.

Ongoing service coordination (after the development of the initial IFSP) is provided by the Division of Mental Health (DMH), and SPOEs in regions under the new contract. The February 2006 contract will eliminate independent service coordinators leaving DMH and SPOE service coordinators to coordinate services for children and families in First Steps statewide.

Services are provided by personnel meeting state qualifications who contract with DESE. Providers enroll with the Central Finance Office (CFO) and are selected from a matrix which provides basic information regarding availability, coverage area, and trainings completed, among other items.

The Central Finance Office (CFO) is under contract with DESE to handle provider billing/claiming and reimbursement for services. The CFO also developed the child data systems, including the old SPOE software and new web-based system.

The July 2004 and the February 2006 SPOE contracts require that the SPOEs organize a Regional Interagency Coordinating Council. Roles of the RICC include assisting the SPOE with public awareness, child find, and establishing a target child count.

#### **Development of General Supervision System:**

Since July 1, 2005, DESE has implemented a revised General Supervision system. This system includes standards and procedures regarding monitoring, public awareness, professional development, complaints processing, data collection, financial management, and interagency agreements. The general supervision system includes a series of scheduled data reviews designed to monitor SPOE compliance with Part C regulations as well as the public reporting of data at the SPOE and county levels. The current data reporting covers many of the State Performance Plan indicators, and any not already covered will be added to the reports. The reports are posted each month on DESE's First Steps website. For a more detailed description of the general supervision system, see Indicator 9.

#### **First Steps Regional Consultants:**

Four regional First Steps consultants are available through a contract with the Child Care Resource and Referral Network, and work with SPOEs, service coordinators, service providers and RICCs. These consultants assist these groups in problem-solving and technical assistance around compliance and recommended practice. The First Steps Consultants also assist DESE by providing the first line of assistance to the field, supporting the Lead Agency in compliance monitoring and child complaint investigation, training providers and referral sources, conducting provider recruitment and improving implementation of Part C by decreasing non-compliance prior to monitoring reviews and increasing use of effective practices.

#### **Development of IFSP Quality Indicators Rating Scale (QIRS):**

Missouri has developed, in collaboration with stakeholders, the National Early Childhood Technical Assistance Center (NECTAC) staff, and national experts, an *IFSP Quality Indicators Rating Scale (QIRS)*. The QIRS was designed to be used by the Part C program in Missouri for accountability and performance monitoring purposes. The QIRS addresses each area of the IFSP document in a Likert scale fashion, with "1" representing Unacceptable, "3" representing Acceptable, and "5" representing Recommended Practice. Each Likert scale item has a descriptor for determining into which category the IFSP fell for each area evaluated. The quality review will identify areas of strengths and concerns in IFSPs reviewed and aggregate data for the overall quality of IFSPs developed in each System Point of Entry region. Under the July 2004 and February 2006 SPOE contracts, the state will award incentive dollars to a SPOE region that demonstrates "high quality" IFSPs as determined by the ratings on the scale and meets or exceeds the performance standards identified in the contract. The Missouri Part C program is now incorporating the use of the *Missouri First Steps IFSP Quality Indicators Rating Scale* into the statewide monitoring and accountability system. The Quality Indicators can be found online at <http://www.dese.mo.gov/divspeced/FirstSteps/pdfs/MOIFSPRateScale.pdf>.

#### **Development of the Web-based Child Data Management Module:**

Missouri's new web-based child data and IFSP system was released in June 2005 and implemented statewide September 1, 2005. The system contains all elements of referral, evaluation, eligibility determination, and IFSP development and implementation. The system is compliance-driven and will ensure compliance with regulations as well as best practices to the extent possible. New referrals to the Part C system are being entered into the web system, and many children with current IFSPs are being transferred to the system. Children who are expected to exit the First Steps program by September 2006 will not be transferred to the web system; therefore, not every child with an IFSP will be transferred. In the interim, all children will be accounted for through either the old software or the new web-based system. More complete data regarding demographics, health information, outcomes, domains, and IFSP specifics will be available online for children in the web system, and will become an integral part of Missouri's general supervision system.

<b>Monitoring Priority: Early Intervention Services In Natural Environments</b>
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**Indicator 1:** Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.  
(20 USC 1416(a)(3)(A) and 1442)

<b>Measurement:</b>
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Percent = Number of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner divided by the total number of infants and toddlers with IFSPs times 100.
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Account for untimely receipt of services.
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**Overview of Issue/Description of System or Process:**

The provision of services for Missouri's Part C program is comprised of the following:

- Intake Service Coordination is provided by System Points of Entry (SPOEs) through contracts with the Lead Agency. Intake service coordinators accept referrals and coordinate the evaluation process to determine eligibility for the Part C system and develop the initial Individualized Family Service Plan (IFSP).
- The Department of Mental Health (DMH), through an interagency agreement, funds ongoing service coordination for an agreed upon number/percent of infants and toddlers (approximately 40% of eligible children). Service coordination for all other eligible infants and toddlers will be provided statewide via service coordinators employed by SPOEs after January 2006. Independent service coordination will no longer be an option when the February 2006 contract is implemented. This revision will provide extensive oversight of service coordination activities.
- Personnel meeting state qualifications who are under contract with DESE provide all other early intervention services required by Part C. These providers bill the Central Finance Office (CFO). The CFO, when applicable, bills Department of Social Services (Medicaid) who reimburses the CFO per the interagency agreement between the Division of Medical Services and DESE.
- Payments to providers in Missouri's Part C system are based on the state's Medicaid reimbursement rate. This rate includes a natural environments incentive for services provided in those settings. The February 2006 contract arrangement with SPOEs will allow the SPOE to reimburse providers for mileage when serving children in rural or remote areas that do not have local providers.

The model for service providers is an independent system where providers contract with DESE and enroll with the CFO. Providers are then chosen by the family from a service matrix. The February 2006 SPOE contracts require the SPOEs to provide services through the independent provider model and/or employment of or contracts with providers. A transportation incentive is also included in the new contracts which will allow SPOEs to reimburse providers for some travel costs. These options should help to ensure provider availability across the state.

IFSP services data are collected through the Central Finance Office (CFO) authorization and billing system. The new web-based Child Data Management system has a "Review of Delivered Services" report where service coordinators can monitor the provision of services in accordance with the IFSP. In addition, the web system enables "real-time" entry of service authorization which the service providers can then access almost immediately. This real-time system will help eliminate delays in service provision due to delays in entry and the subsequent receipt of service authorizations.

Discussions with SPOE directors and the SICC regarding the definition of "timely services" resulted in this list of considerations:

- Since Missouri has an independent provider system, provider scheduling and feasibility of fitting a new child/service into a provider's schedule in a timely manner must be taken into account

- Service Coordination as a service is not a billed service for DMH and SPOE service coordinators, therefore should be excluded if the definition of timely services is based on service authorization and billing data
- All services for a child must be timely to count a child as receiving timely services
- Need to take frequency of the services into account
- Need to look at compensatory services as a result of delayed implementation
- Need to address any inconsistencies in data entry of authorizations and No Provider Available services.

#### **Baseline Data for FFY 2004 (2004-2005):**

Based on the considerations and recommendations listed above, Missouri will define “Timely Service” as follows: Each service for a child must be initiated within 30 days of the service authorization start date. Every service for every child will be evaluated for timeliness, and in order to determine that a child received services in a timely manner, all services must have started within 30 days of the initiation date. If a child has a “No Provider Available” (NPA) authorization, the child can not be counted as having received timely services, since this indicates that the service could not begin because no provider was available to provide the service. This definition was established through stakeholder involvement and applied retrospectively to previously gathered data.

#### **Children Receiving Timely IFSP Services 2004-05**

Children Receiving All IFSP Services within 30 Days	4,743
Total Children Receiving IFSP Services	6,805
% of Children Receiving All IFSP Services within 30 Days	69.7%

Children Receiving All IFSP Services within 30 Days is determined by subtracting the authorization start date for a given service from the first date of service. If one or more service on the child's IFSP is greater than 30 days or the child received a 'No Provider Available' authorization within the span of dates (7/1/2004 to 6/30/2005), the child is not counted as receiving all IFSP Services within 30 days.

#### **Discussion of Baseline Data:**

Prior to requirements and development of this State Performance Plan, the timely provision of services was not measured in this fashion, and it is important to note that during 2004-05 it was not known that these data would be used to derive the timelines. There are likely some inconsistencies between SPOEs and service coordinators in the way that IFSP service start dates are entered into the system; some may be entered based on provider availability, some on IFSP meeting dates, some on the date service is expected to start, etc. There is also inconsistency in the use and entry of No Provider Available authorizations. In order to make these data more consistent, technical assistance will be provided to service coordinators and SPOEs.

The determination of timely services was made by looking at all services authorized for a child. If any one service began more than 30 days past the authorized start date, the child was not counted as receiving timely services. This results in 2,062 or 30.3% of children counted as not receiving at least one service within 30 days. However, approximately 98% of children receive at least one service within the 30 day timeline which indicates that the vast majority of children receive some services within 30 days.

In order to account for the 30.3% of children receiving IFSP services who did not receive all services in a timely manner, the Division examined the data. Of the 2,062 children who did not receive all services in a timely manner, 894 received all services within 45 days of authorization (meaning 80.7% of children received all IFSP services within 45 days); another 409 had received all services within 60 days (86.7%). Also, 156 of the 2,062 children received at least one 'No Provider Available' authorization meaning that a provider was not available to provide the service for some length of time. The length of time for which no providers were available could not be easily ascertained from the data; therefore some children may have been without a provider for a short amount of time, possibly even less than the 30 day window.

SPOE Regions with the lowest percent of children receiving all IFSP services within 30 days included Camdenton/Rolla (44.9%), Union (53.2%), Springfield (53.4%), Montgomery City (56.7%), and Cuba

(59.4%). SPOEs with the highest percent included Hannibal (76.9%), Jefferson City (75.6%), and St. Louis County (75.2%).

Looking at specific service types in which delays were experienced, 30.6% of the 304 Audiology authorizations from 7/1/2004 to 6/30/2005 were delivered after 30 days, along with 24.6% of 858 Nutrition Services authorizations, 19.7% of 370 Nursing Services authorizations, 14.4% of 5,797 Physical Therapy authorizations, 13.3% of 5,892 Special Instruction authorizations, and 12.3% of 7,239 Occupational Therapy authorizations. The services least prone to delay included Special Instruction-ABA (5.5% of 1,139 authorizations delivered after at least 30 days), Speech Language Pathology (9.5% of 10,058 authorizations), and Bilingual Interpretation (9.5% of 231 authorizations).

Public reporting of these data will entail reporting by SPOE region on the percent of children receiving all services within 30 days.

FFY	Measurable and Rigorous Targets
All Years	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner

**Improvement Activities/Timelines/Resources:**

Improvement Activities	Timelines	Resources
Ensure consistency of usage/entry of authorizations data for valid data	Spring 2006	SPOEs, Consultants
Conduct regular data reviews to evaluate service coordinator contacts with families in SPOEs/Regional Centers that have delayed Service provision. Determine if the reason for delay is a service coordination or provider issue. Specifically look at services with highest percents of delays. Implement strategies/sanctions for correction of delay based on the information found. If/when non-compliance is identified, deploy consultants to assist in developing and implementing corrective actions.	2005-2011 Quarterly	Lead Agency (LA) Staff, Consultants
Analyze impact of transportation reimbursement, employment of providers and RICC/SPOE provider recruitment activities in order to track trends and target provider recruitment after new contract structure in place	2006-2007	LA Staff, Consultants
Develop and implement Transdisciplinary Service Training for service coordinators and providers	2005-2011	LA Staff, Consultants

## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

#### Monitoring Priority: Early Intervention Services In Natural Environments

**Indicator 2:** Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.

#### Measurement:

Percent = Number of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children divided by the total number of infants and toddlers with IFSPs times 100.

### Overview of Issue/Description of System or Process:

Data on service locations are collected through the child data system in two ways. Following completion of the IFSP, a primary setting for the IFSP is selected by the IFSP team during initial and annual reviews. Second, in order to authorize a service, each service must indicate the location as Home, Other Family Location, Community Setting or Special Purpose Center/Clinic. The web system requires a justification for any service authorized in a non-natural environment. Justification for services provided outside of the natural environment has been monitored in conjunction with SPOE visits, and is not an area where problems have been found, except for some isolated situations. The IFSP Quality Indicators Rating Scale includes a section evaluating justification of services outside the natural environment.

### Baseline Data for FFY 2004 (2004-2005):

Primary Setting for children under 3 years of age with active IFSPs	12/1/2002	%	12/1/2003	%	12/1/2004	%
Home	2276	77.4%	3042	88.9%	3126	90.7%
Program Designed for Typically Developing Children	228	7.7%	229	6.7%	212	6.2%
Total		85.1%		95.6%		96.9%
Program Designed for Children with Developmental Delay or Disabilities	182	6.2%	124	3.6%	78	2.3%
Service Provider Location	1	0.0%	10	0.3%	11	0.3%
Hospital (Inpatient)	1	0.0%	6	0.2%	16	0.5%
Other Setting	254	8.6%	12	0.4%	2	0.1%

### Discussion of Baseline Data:

Missouri has a very high percentage of children served in natural environments according to the primary setting data. Similarly, service location data from October 2005 show that 74.6% of services are provided in the home, 15.9% in community settings and 2.0% in other family locations, totaling 92.5% of services provided in natural environments. Both the primary setting data and the service location data show high levels of services provided in natural Environments in the State. However, there are areas of the state that have a disproportionate number of services provided in special purpose centers. These areas are reviewed during the quarterly data review process and consultants have been directed to visit certain special purpose centers and to speak with service coordinators to gather more information regarding this issue.



Data on the locations of services are publicly reported by SPOE region in the Key Indicators report which is posted on the web monthly. Primary setting data will be added to the public reporting of data.

<b>FFY</b>	<b>Measurable and Rigorous Targets</b>
<b>2005-2006</b>	96.91% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or programs for typically developing children
<b>2006-2007</b>	96.92%
<b>2007-2008</b>	96.94%
<b>2008-2009</b>	96.96%
<b>2009-2010</b>	96.98%
<b>2010-2011</b>	97.00%

**Improvement Activities/Timelines/Resources:**

See also Indicator 1

<b>Improvement Activities</b>	<b>Timelines</b>	<b>Resources</b>
Implement regular data reviews and analyze service location data by region, demographic variables and service types in order to target specific areas, groups, services or provider agencies	Quarterly 2005-11	LA Staff & Consultants
During the data review process, assign consultants to investigate specific agencies where there is a high level of services in a special purpose center and assist in development and implementation of improvement plans or corrective actions where necessary	Quarterly 2005-11	Consultants

## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

#### Monitoring Priority: Early Intervention Services In Natural Environments

#### Indicator 3: Percent of infants and toddlers with IFSPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication); and
- C. Use of appropriate behaviors to meet their needs.

(20 USC 1416(a)(3)(A) and 1442)

#### Measurement:

Separately for each of A, B, and C:

- A. Positive social-emotional skills (including social relationships):
- B. Acquisition and use of knowledge and skills (including early language/communication):
- C. Use of appropriate behaviors to meet their needs:
  - a. Percent of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers = Number of infants and toddlers who reach or maintain functioning at a level comparable to same-aged peers divided by number of infants and toddlers with IFSPs assessed times 100.
  - b. Percent of infants and toddlers who improve functioning = Number of infants and toddlers who improved functioning divided by number of infants and toddlers with IFSPs assessed times 100.
  - c. Percent of infants and toddlers who did not improve functioning = Number of infants and toddlers who did not improve functioning divided by number of infants and toddlers with IFSPs assessed times 100.

If children meet the criteria for a, report them in a. Do not include children reported in a in b or c. If a + b + c does not sum to 100%, explain the difference.

#### Overview of Issue/Description of System or Process:

The Department of Elementary and Secondary Education serves as the Lead Agency for Part C as well as Part B. In order to begin the process of gathering data on these specific early childhood outcomes, Missouri convened representatives from both the Part C and 619 programs October 26-27, 2005, with organizational help from the National Early Childhood Technical Assistance Center (NECTAC). This work group of Parts C and B administrators met with DESE to develop a pilot process on early childhood outcomes, facilitated by Robin Rooney and Anne Lucas of NECTAC. Individuals participating represented all regions of the state, including urban, suburban and rural communities.

Beginning in November 2005 but no later than January 15, 2006, three models of determining early childhood outcomes will be piloted through June 2006 in a number of school districts/SPOE regions across the state. This data will be reported to OSEP in February 2007. The three pilot models include determining early childhood outcomes through:

- Use of multiple sources of available data, and in some cases specific tools will be used as the assessment of choice. Such tools include the Dial, Brigance, Ages & Stages Questionnaire, and High Scope Child Observation Record
- Use of specific assessment tools (HELP and Ages & Stages Questionnaire)

- Development of a specific tool to rate OSEP-required outcomes based on the HELP and Brigance.

In all pilot sites, individuals currently conducting assessments will continue in this role. Each site will determine child outcomes through both the assignment of a functional age and use of a multipoint scale (3, 5 or 7 points) based on the Early Childhood Outcomes Center's (ECO) scale. Collating data and determination of child outcomes are being piloted in three ways:

- Determination by existing evaluation or IFSP team
- Determined by tool (where tool is being developed for this sole purpose)
- Determined by administrator using a formula to convert data into a five point scale modified from the ECO Center scale.

Children participating in the pilot process will be determined using the following criteria:

- Child must have the potential for six or more months of service in the Part C or 619 program
- Child must enter the program on or after the date the site begins pilot procedures (i.e., pilot procedures will not be applied or "back-dated" for children who entered the program before its designated start date). Entry to the program is being piloted as the date the child is determined eligible for Part C or 619 services, and programs will have a 30 day window to determine the child's outcome level after this point.
- In large programs, a sample of evaluators will be included in the pilot process, and any child meeting the criteria above who is evaluated by those select individuals will be included in the pilot (e.g., Special School District of St. Louis County will train some of its evaluators in the process, and all the children they work with will be included in the pilot).

In March 2006, the workgroups will reconvene to recommend a statewide process to the DESE based on an examination of:

- The extent to which each pilot process met stated principles (useful at local and state levels, simple/feasible, relevant to existing needs)
- The face validity of assigning children functional ages versus use of a multipoint scale to determine individual child outcomes
- Efficacy and efficiency of use.

At the March 2006 meeting, workgroup participants will help make final decisions about the process or instruments required for data submission, as well as recommend the procedure for statewide data collection. Subsequent to this meeting, the Missouri process for determining child outcomes will be finalized and prepared for dissemination and training in local Part C and 619 programs for implementation during the 2006-07 school year. Missouri plans to assess all children in Part C and 619 programs when fully implemented.

#### **Baseline Data for FFY 2004 (2004-2005):**

This is a new indicator. Data on the status at entry to Part C programs will be reported in the February 2007 APR. Entry/exit (outcome) data and targets will be reported in the February 2008 APR for children who have received Part C services for 6 months or more.

#### **Discussion of Baseline Data:**

See Overview of Issue for planned method for collecting baseline data.

<b>FFY</b>	<b>Measurable and Rigorous Targets</b>
<b>All Years</b>	To be established in February 2008 Annual Performance Report

**Improvement Activities/Timelines/Resources:**

<b>Improvement Activities</b>	<b>Timelines</b>	<b>Resources</b>
Determine data collection tools and measurement methods for pilot	Fall 2005	Selected ECSE and Part C programs, NECTAC, LA staff
Conduct pilot implementation and data collection	January-June 2006	Selected ECSE and Part C programs, NECTAC, LA staff
Evaluate pilot data collection and revise system accordingly	Spring/Summer 2006	Selected ECSE and Part C programs, NECTAC, LA staff
Develop and deliver training and technical assistance statewide	Summer 2006 & ongoing	NECTAC, LA staff, consultants
Implement data collection and reporting statewide	Summer 2006	LA staff, consultants
Establish targets and improvement activities	February 2008	LA staff

## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

### Monitoring Priority: Early Intervention Services In Natural Environments

**Indicator 4:** Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
  - B. Effectively communicate their children's needs; and
  - C. Help their children develop and learn.
- (20 USC 1416(a)(3)(A) and 1442)

#### Measurement:

- A. Percent = Number of respondent families participating in Part C who report that early intervention services have helped the family know their rights divided by the number of respondent families participating in Part C times 100.
- B. Percent = Number of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs divided by the number of respondent families participating in Part C times 100.
- C. Percent = Number of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn divided by the number of respondent families participating in Part C times 100.

### Overview of Issue/Description of System or Process:

Missouri has conducted two annual surveys of all families with children in the First Steps program. The first Family Survey was sent in spring 2004, and the second one in spring 2005. Response rates statewide were 42.1% in 2004 and 30.6% in 2005. In addition, a family exit survey was implemented in August 2004 and is sent to families six months after exiting First Steps.

IFSP Quality Indicators were developed and finalized during 2004-05 and emphasize family-centered services by examining linkages between the family's concerns, priorities and resources and the IFSP's outcomes and services. It is anticipated this linkage will further the lead agency's understanding of families' ability to effectively communicate their children's needs, so as to provide appropriate assistance or training.

### Baseline Data for FFY 2004 (2004-2005):

This indicator is considered new; however Missouri has been gathering data on these items through the family surveys.

**Family Survey Data**

A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights

*Q7. I received information and explanations about our family's legal rights (such as due process, procedural safeguards, child complaints).*

	Family Survey 2004			Family Survey 2005		
Strongly Agree	609	47.5%	93.1%	526	56.4%	92.8%
Agree	586	45.7%		340	36.4%	
Disagree	70	5.5%	6.9%	55	5.9%	7.2%
Strongly Disagree	18	1.4%		12	1.3%	

B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs

*Q21. Since being part of First Steps, I know how to work with professionals and advocate for what my child needs.*

	Family Survey 2004			Family Survey 2005		
Strongly Agree	529	40.6%	93.3%	569	60.2%	96.0%
Agree	687	52.7%		338	35.8%	
Disagree	75	5.8%	6.7%	34	3.6%	4.0%
Strongly Disagree	13	1.0%		4	0.4%	

C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn

*Q14. Early intervention services give my family ways to improve my child's development.*

	Family Survey 2004			Family Survey 2005		
Strongly Agree	886	64.6%	98.8%	771	77.8%	98.4%
Agree	469	34.2%		204	20.6%	
Disagree	15	1.1%	1.2%	13	1.3%	1.6%
Strongly Disagree	1	0.1%		3	0.3%	

*Q18. Early intervention services have increased my family's capacity to enhance my child's development.*

	Family Survey 2004			Family Survey 2005		
Strongly Agree	886	64.6%	98.8%	743	75.6%	98.7%
Agree	469	34.2%		227	23.1%	
Disagree	15	1.1%	1.2%	11	1.1%	1.3%
Strongly Disagree	1	0.1%		2	0.2%	

**Discussion of Baseline Data:**

Baseline data show very high levels of agreement with the statements that early intervention services have helped families know their rights, effectively communicate their children's needs and help their children develop and learn.

The only demographic information captured on the survey is county of residence. More detail will need to be gathered on the survey in order to determine if the respondents accurately represent the state.

Since this indicator is considered new, targets are not required until the February 2007 Annual Performance Report. Rather than setting targets based on the data above, the SICC recommended using this year to evaluate the survey instrument and the data to determine how accurate the instrument is and how representative the responses are.

<b>FFY</b>	<b>Measurable and Rigorous Targets</b>
<b>All Years</b>	To be established in February 2007 APR

**Improvement Activities/Timelines/Resources:**

<b>Improvement Activities</b>	<b>Timelines</b>	<b>Resources</b>
Determine need to revise current family surveys (annual and exit) and/or use questions from NCSEAM survey.	2005-06	LA Staff
Determine need to collect basic demographic data in order to ensure a representative sample from each SPOE region.	2005-06	LA Staff
Analyze QIRS data regarding family's concerns, priorities and resources in order to target technical assistance to SPOEs based on reviews of data.	2006-2011	LA Staff, Consultants

## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

### Monitoring Priority: Effective General Supervision Part C / Child Find

**Indicator 5:** Percent of infants and toddlers birth to 1 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

(20 USC 1416(a)(3)(B) and 1442)

#### Measurement:

- A. Percent = Number of infants and toddlers birth to 1 with IFSPs divided by the population of infants and toddlers birth to 1 times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = Number of infants and toddlers birth to 1 with IFSPs divided by the population of infants and toddlers birth to 1 times 100 compared to National data.

### Overview of Issue/Description of System or Process:

When Missouri redesigned the Part C system from 1997-2001, a significant statewide child find training effort was undertaken by educating primary referral sources on eligibility requirements and referral procedures. Referral source data suggests that the public is aware of the program and eligibility and participation data are relatively consistent across races and SPOEs. While child find is a state-level responsibility, the new contracts require SPOEs to develop RICCs to assist the SPOEs with public awareness, child find, and establishing a target child count. Most of Missouri's child find efforts occur at the regional level. Activities include maintenance of SPOE-Hospital/NICU relationships, and targeted child find activities at the SPOE/RICC levels with assistance from the First Steps Consultants. The SPOE contracts that will be in place statewide in February 2006 places much more responsibility on the SPOEs and their RICCs on identifying and reaching under-served populations and working with primary referral sources. A performance measure built into the contract looks at percentages of children served.

Data show that the majority of SPOE regions have increased the number of children served in the First Steps program since December 2002. In January 2005, consultants began contacting SPOEs with the lowest percentages served to identify causes for low child count and, in cooperation with LICCs and RICCs, develop a plan for targeted child find activities. If determined necessary, training has been provided for referral sources that demonstrate low referral rates or high numbers of inappropriate referrals. One example is that representatives from Neonatal Intensive Care Units (NICUs) from across the state were brought together in October 2005 for training on eligibility criteria and how to make online referrals through the new web system. It is anticipated that this training will increase the number of appropriate referrals received from NICUs.

The Department of Mental Health (DMH) interagency agreement requires Regional Centers to assist with child find. Discussions are currently underway with the Department of Health and Senior Services (DHSS) regarding a memorandum of understanding regarding Child Abuse Prevention and Treatment Act (CAPTA) referrals which will be finalized pending receipt of federal regulations. Discussions are also underway with DHSS regarding revision to the interagency agreement and revised activities regarding the newborn hearing screening program to incorporate training on this program in the First Steps professional development system.

Legislation passed in 2005 requires that the state implement Family Cost Participation (FCP) for families receiving First Steps services. The sliding scale fee will be between \$5 and \$100 per month per family, with no fee for children who are Medicaid eligible. The fee will be put in place in January/February 2006.



It is not known what impact FCP will have on participation rates for Missouri, but must be taken into consideration when setting targets for the future.

**Baseline Data for FFY 2004 (2004-2005):**

**Percent of Children Birth to Age 1 with IFSPs**

	Dec-02	Dec-03	Dec-04
Missouri	0.48%	0.61%	0.67%

**States with Narrow Eligibility Criteria (Excluding At Risk)**

**Comparison of December 2004 Birth to 1 Child Count / 2004 Population Estimates**

North Dakota	1.72%
Montana	1.58%
Oklahoma	1.22%
Alaska	0.82%
<b>MISSOURI</b>	<b>0.67%</b>
Arizona	0.61%
Nevada	0.58%
District of Columbia	0.57%
National Baseline	0.92%

Source: Data from <http://www.federalresourcecenter.org/frc/sppc.htm>

**Discussion of Baseline Data:**

Missouri continues to serve less than the average percentage of children both for the states with narrow eligibility criteria and nationally; however, Missouri's child count data for children birth to age 1 has been increasing over the past several years. Current data suggest that there will be an increase in the number of children birth to age 1 for the December 2005 child count.

Analysis of referral source data and eligibility rates show consistent data across the state. Referral source data show large increases in referrals from NICUs and parents for infants under 1 year. Those are the two most appropriate referral sources for the youngest infants, indicating that child find efforts in the state are resulting in an appropriate percentage of infants and toddlers served by the Part C system.

Data on percentage of children served by SPOE is publicly reported in the SPOE Report which is posted on the web monthly.

FFY	Measurable and Rigorous Targets
<b>2005-2006</b>	0.70% of infants and toddlers birth to 1 will have IFSPs
<b>2006-2007</b>	0.73%
<b>2007-2008</b>	0.76%
<b>2008-2009</b>	0.79%
<b>2009-2010</b>	0.82%
<b>2010-2011</b>	0.85%

**Improvement Activities/Timelines/Resources:**

<b>Improvement Activities</b>	<b>Timelines</b>	<b>Resources</b>
Analyze data to target referral sources with high percentage of inappropriate referrals, promote referrals from underserved populations and educate primary referral sources (NICU, PAT, pediatricians, CAPTA, Newborn Hearing Screening)	2005-2011	LA Staff, Consultants, RICCs, SPOE
Analyze data to determine the number of children who meet First Steps eligibility criteria but whose parents refused services to assess impact on the system	2006-07	LA Staff, SPOEs
Continue to work with birth defect data from the Department of Health and Senior Services to evaluate child find efforts	2006-07	DHSS
Analyze RICC Child Find plans to determine impact of actions on locating additional eligible children	2006-2011	RICCs, Consultants
Work with Early Head Start/Head Start to increase identification of and inclusion of children with disabilities in those programs.	2006-2011	LA Staff, Consultants, RICCs
Continue to support PAT National Center training of parent educators on appropriate FS referrals and serving families with special needs children	2005-2011	LA Staff

## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

### Monitoring Priority: Effective General Supervision Part C / Child Find

#### Indicator 6: Percent of infants and toddlers birth to 3 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

(20 USC 1416(a)(3)(B) and 1442)

#### Measurement:

- A. Percent = Number of infants and toddlers birth to 3 with IFSPs divided by the population of infants and toddlers birth to 3 times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = Number of infants and toddlers birth to 3 with IFSPs divided by the population of infants and toddlers birth to 3 times 100 compared to National data.

### Overview of Issue/Description of System or Process:

See Indicator 5

#### Baseline Data for FFY 2004 (2004-2005):

##### Percent of Children Birth to Age 3 with IFSPs

	Dec-02	Dec-03	Dec-04
Missouri	1.33%	1.51%	1.53%

#### States with Narrow Eligibility Criteria (Excluding At Risk)

##### Comparison of December 2004 Birth to 3 Child Count / 2004 Population Estimates

North Dakota	2.80%
Montana	2.13%
Oklahoma	2.04%
Alaska	2.02%
Arizona	1.54%
<b>MISSOURI</b>	<b>1.53%</b>
District of Columbia	1.30%
Nevada	1.30%
National Baseline	2.24%

Source: Data from <http://www.federalresourcecenter.org/frc/sppc.htm>

### Discussion of Baseline Data:

See Indicator 5

While child count numbers in Missouri fluctuate from month to month and have increased over the past several years, the percentage served has leveled off to approximately 1.5% to 1.6% of the population. Based on data reviews that began in January 2005, consultants are contacting SPOEs with the lowest percentages served to identify causes for low child count and develop, in cooperation with LICCs and RICCs, a plan for targeted child find activities with referral sources that demonstrate low referral rates.

Referral source data show increases in the percentage of overall referrals from NICUs and parents. In 2003-04, there were 534 NICU referrals (8.2% of total First Steps referrals for that year) and 2,682

referrals from parents (41.2%). In 2004-05, there were 700 NICU referrals (12.1%) and 2,498 referrals from parents (43.1%).

Data on percentage of children served by SPOE is publicly reported in the SPOE Report which is posted on the web monthly.

<b>FFY</b>	<b>Measurable and Rigorous Targets</b>
<b>2005-2006</b>	1.55% of infants and toddlers birth to 3 will have IFSPs
<b>2006-2007</b>	1.57%
<b>2007-2008</b>	1.59%
<b>2008-2009</b>	1.61%
<b>2009-2010</b>	1.64%
<b>2010-2011</b>	1.67%

**Improvement Activities/Timelines/Resources:**

See Indicator 5

## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

#### Monitoring Priority: Effective General Supervision Part C / Child Find

**Indicator 7:** Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

(20 USC 1416(a)(3)(B) and 1442)

#### Measurement:

Percent = Number of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline divided by number of eligible infants and toddlers evaluated and assessed times 100.

Account for untimely evaluations.

### Overview of Issue/Description of System or Process:

Eliminating referrals that exceed timelines due to SPOE, system or provider issues is a priority for Missouri's Part C system. Current activities regarding referral timelines include the following:

- Monthly reviews by DESE staff of SPOE data regarding referral timelines
- Web system automatically produces lists of children in referral for more than 45 days by SPOE and requires reasons for exceeding the timeline. These lists are readily available to SPOE administrators as well as intake coordinators through the main menu page of the web system.
- Consultants are deployed to SPOEs that are exceeding timelines for data analysis and technical assistance
- Timelines were a major focus of the on-site monitoring in February/March and June/July 2005 and corrective actions were required for any SPOEs found out of compliance
- Changes to SPOE contracts focus on timely evaluation and assessment through establishment of evaluation teams that SPOEs must use instead of relying on independent providers to conduct evaluations and submit reports in a timely fashion.

After the February 2006 contracts are in place, all SPOE contracts will require a SPOE-based team of individuals to make eligibility determinations and develop initial IFSPs. This structure will facilitate consistency in eligibility determinations while reducing referrals exceeding timelines.

### Baseline Data for FFY 2004 (2004-2005):

#### 2004-05 Referrals resulting in IFSPs

# IFSPs with acceptable timelines *	2,120
Total IFSPs	2,860
% with acceptable timelines	75.4%

\* "Acceptable timelines" includes those evaluations and initial IFSP meetings completed within the 45-day timelines as well as those that went over 45 days due to parent or child reasons.

As requested in OSEP's response to Missouri's 2003-04 Annual Performance Report, data are provided by SPOE region.

**Timelines on Referrals from January 1, 2005 to August 31, 2005 Resulting in IFSPs**

Region	(A) Referral to IFSP < 45 Days	(B) Referral to IFSP > 45 Days with Acceptable Reason*	(C) Referral to IFSP > 45 Days without Acceptable Reason	(D) % Acceptable
Southeast (Regions 7, 21, 23)	79	8	18	82.86%
Kirksville (Region 8)	11	1	0	100.00%
Kansas City (Region 9)	257	17	31	89.84%
Sedalia (Region 10)	21	1	23	48.89%
Columbia (Region 11)	34	9	30	58.90%
Southwest (Regions 12, 14, 15)	75	6	32	71.68%
Springfield (Region 13)	100	22	24	83.56%
Jefferson City (Region 16)	21	5	14	65.00%
Camdenton/Rolla (Region 17)	47	1	5	90.57%
Union (Region 19)	8	3	8	57.89%
Cuba (Region 20)	11	0	0	100.00%
South Central Mo (Region 18, 22)	23	3	25	50.98%
North Central Mo (Region 24)	13	0	1	92.86%
Shelby (Region 25)	11	0	4	73.33%
Montgomery City (Region 26)	10	3	10	56.52%
Jefferson County (Region 3)	61	7	37	64.76%
Northwest (Region 4)	125	0	6	95.42%
Greater St Louis (Region 1)	208	30	29	89.14%
St Louis County (Region 2)	267	10	49	84.97%
Total	1400	126	346	81.52%

\* "Acceptable reasons" includes those evaluations and initial IFSP meetings that went over 45 days due to parent or child reasons.

Calculation: % Acceptable (D) = Acceptable Timelines (A + B) / Total Referrals (A + B + C)

The following table provides detail on the reasons for exceeding the 45 day timeline. Collection of the reasons started in January 2005. The collection was in place for several months before comprehensive statewide reporting was achieved. Therefore, of the 472 referrals that resulted in IFSPs after 45 days in referral, 245 (51.9%) were given 45-day reasons as directed by DESE. The 227 referrals for which reasons were not supplied are considered to not have an acceptable reason. In the table above, many of the SPOEs with the lowest percent of acceptable timelines are also the SPOEs without reasons for many of the children; therefore it is likely that the actual percent of referrals with acceptable timelines is higher than presented here, and data is improving as this understanding is increasing within SPOEs.

**Reasons for Exceeding Timelines for Referrals from January 1, 2005 to August 31, 2005 Resulting in IFSPs**

SPOE	'Acceptable' Reasons	'Unacceptable' Reasons or No Reason Provided				Grand Total
	Parent/Child Delay	SPOE Delay	Provider Delay	Provider Availability Delay	No Reason	
Southeast (Reg. 7, 21, 23)	8		3		15	26
Kirksville (Reg. 8)	1					1
Kansas City (Reg. 9)	17	1	1	3	26	48
Sedalia (Reg. 10)	1		2		21	24
Columbia (Reg. 11)	9	6	5	6	13	39
Southwest (Reg. 12, 14, 15)	6	1	4	1	26	38
Springfield (Reg. 13)	22	4	8		12	46
Jefferson City (Reg. 16)	5		2	1	11	19
Camdenton/Rolla (Reg. 17)	1				5	6
Union (Reg. 19)	3	1	6		1	11
Cuba (Reg. 20)						0
South Central Mo (Reg. 18, 22)	3		8		17	28
North Central Mo (Reg. 24)			1			1
Shelby (Reg. 25)			2		2	4
Montgomery City (Reg. 26)	3		4	2	9	13
Jefferson County (Reg. 3)	7	4	2		31	44
Northwest (Reg. 4)					6	6
Greater St Louis (Reg. 1)	30	3	3	1	22	59
St Louis County (Reg. 2)	10	5	2	1	41	59
Grand Total	126	25	53	15	227	472
% of Total	26.7%	5.3%	11.2%	3.2%	48.1%	100.0%

**Discussion of Baseline Data:**

Missouri's "IFSPs with acceptable timelines" data has significantly improved, from 51.2% in 2003-04 to 75.4% in 2004-05, with the period from January through August 2005 showing even more improvement (81.52%) than the 2004-05 year.

Missouri began collecting reasons for exceeding the 45 day timelines in January 2005 through paper reports from the SPOEs. The reasons for exceeding 45 days were built into the new web system to better analyze and address this compliance standard.

The percents in the three regions that have been under the new contract (Northwest, Greater St. Louis and St. Louis County) and who have evaluation teams is much better than the average in the remainder of the state. Evaluation teams will be in place statewide in early 2006 and are expected to further reduce 45 day timeline issues.

The new contracts specify 45-day timelines as a compliance standard, and liquidated damages will be applied from the first to third renewal periods for failing to meet the standard.

See Indicator 9 for a description of the monitoring system and corrective actions for SPOEs exceeding 45 day timelines.

Public reporting of data includes data on 45 day timelines by SPOE.

FFY	Measurable and Rigorous Targets
All Years	100% of eligible infants and toddlers with IFSPs will have an evaluation and assessment and an initial IFSP meeting conducted within Part C's 45-day timeline

**Improvement Activities/Timelines/Resources:**

Improvement Activities	Timelines	Resources
DESE will review data reports by SPOEs regarding 45 day timelines. SPOEs exceeding 45 day timelines are identified and actions are taken to facilitate correction including deploying consultants and requiring corrective actions	2005-2011 Monthly/quarterly analysis	LA Staff & Consultants
Analyze data by location and child demographics in order to target technical assistance to areas/groups in need	2006-2011	LA Staff
Analyze impact of transportation reimbursement, employment of providers and RICC/SPOE provider recruitment activities in order to track trends and target provider recruitment	2006-2011	LA Staff, SPOEs



## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

#### Monitoring Priority: Effective General Supervision Part C / Effective Transition

**Indicator 8:** Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services
  - B. Notification to LEA, if child potentially eligible for Part B; and
  - C. Transition conference, if child potentially eligible for Part B.
- (20 USC 1416(a)(3)(B) and 1442)

#### Measurement:

- A. Percent = Number of children exiting Part C who have an IFSP with transition steps and services divided by number of children exiting Part C times 100.
- B. Percent = Number of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred divided by the number of children exiting Part C who were potentially eligible for Part B times 100.
- C. Percent = Number of children exiting Part C and potentially eligible for Part B where the transition conference occurred divided by the number of children exiting Part C who were potentially eligible for Part B times 100.

### Overview of Issue/Description of System or Process:

DESE's process for collecting transition planning data and correction of noncompliance includes the following:

- Family Exit survey – Data collection began in August 2004 and continues on a monthly basis. Surveys are sent to families who exited the program six months earlier. Family exit survey data provides additional information on the transition process and programs into which the children transitioned. Data are used to target specific SPOEs for additional follow-up.
- Web system – The new web system provides detailed information on when transition meetings are held as well as who participated. The system also notifies SPOE administrators, service coordinators, and providers of impending deadlines, including timelines for transition meetings, and requires that certain actions to be taken by service coordinators, including appropriate transition activities. Data will be used to target specific service coordinators and/or SPOEs that do not meet this compliance standard.
- Monitoring of SPOEs and service coordinators – DESE uses all of the above data in the monitoring process. Any identified noncompliance requires a corrective action and, if not corrected, sanctions will be imposed.

DESE is using State Improvement Grant (SIG) funds to bring together a workgroup of stakeholders in the Part C and 619 (Early Childhood Special Education-ECSE) systems to revise and expand the Part C Transition training, so that it better encompasses and addresses children's transition at age three from Part C services to 619 or community-based services. This training will be placed online and made available for parents, community-based service personnel (child care centers, preschools), and school staff (ECSE, Title I and Parents As Teachers personnel).

Specific regional transition trainings are also being planned by DESE and the consultants to address compliant and effective transition for children approaching age three.

**Baseline Data for FFY 2004 (2004-2005):**

Data from 2004-05 has been compiled from monitoring reviews that occurred during 2004-05, using the sampled files that were reviewed. Data are compiled from initial and follow-up monitoring reviews in six SPOE regions, and include files reviewed for SPOEs, DMH and Independent Service Coordinators. See Indicator 9 for additional information on the monitoring process. As this data is from a limited number of SPOEs and a limited number of files reviewed, this data should not be considered representative of the state as a whole; it is reported because it is the only available data from 2004-05.

	# of files reviewed	# in compliance	# out of compliance	% in compliance
A: IFSPs with transition steps and services	98	45	53	45.9%
B: Notification to LEA, if child potentially eligible for Part B	96	44	52	45.8%
C: Transition conference, if child potentially eligible for Part B	97	45	52	46.4%

Source – results of file reviews for Indicators 103600 (A), 103520 (B) and 103400 (C)

**Discussion of Baseline Data:**

During 2004-05, transition was monitored for selected SPOEs and service coordinators, by looking at a sample of files. The intention of the monitoring was not to produce a percentage of children statewide, however, since the monitoring data is the only available data for 2004-05, this is the data reported as baseline. With implementation of the new web system, Missouri will be able to use the data system as a source of transition data as well as monitoring data. Therefore, future data reporting will use a different, more comprehensive source of data.

For A - IFSPs with transition steps and services: The web system requires that certain transition requirements be addressed, so monitoring of this area can examine the quality of the item rather than just look for its existence.

For B - Notification to LEA: Missouri regulations require parent consent prior to notification of the LEA. In order to make the notification process less cumbersome, the state will evaluate this requirement and consider using the web system data to notify school districts of the number of children who will potentially be referred on a quarterly basis.

For C - Transition conference: The web system records when the transition conference was held so that the number of children with transition conferences held within required timelines can be determined.

Corrective action plans were ordered for all SPOEs, DMH Regional Centers and independent service coordinators found out of compliance in any of these areas. Timelines for correction are as follows:

- For initial reviews, follow-up will occur nine months from the date of the final report letter, in approximately January 2006.
- For follow-up reviews, a second follow-up is being conducted in November and December 2005. Several SPOEs have corrected one or more of these indicators as of the date of this report.
- For initial reviews of DMH and Independent Service Coordinators (initial reviews), follow-up will occur nine months after the date of the final report letter, in approximately July 2006.

First Steps Consultants have been deployed to assist in implementing corrective action plans for SPOEs and DMH and are available to assist independent service coordinators. They will maintain close contact to monitor and report to DESE the improvements made and/or need for additional assistance.

FFY	Measurable and Rigorous Targets
All Years	100% of all children exiting Part C will receive timely transition planning by their third birthday

**Improvement Activities/Timelines/Resources:**

Improvement Activities	Timelines	Resources
Update, implement and evaluate the Part C to Part B transition training for Part C and 619 personnel for technical assistance and corrective action purposes	2005-06	LA staff, Consultants
Monitor data reports and results of compliance monitoring in the area of C to B transition for targeting technical assistance	2006-2011	LA staff, Consultants
Use State Improvement Grant (SIG) funds to assist SPOEs/LEAs in creating Improvement Plans addressing transition issues	2005-2007	SPOEs, LA staff & Consultants
Analyze data to determine the best option for LEA notification of upcoming transition children	2006-07	LA staff

## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

#### Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator 9:** General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416(a)(3)(B) and 1442)

#### Measurement:

A. Percent of noncompliance related to monitoring priority areas and indicators corrected within one year of identification:

- a. Number of findings of noncompliance made related to priority areas.
- b. Number of corrections completed as soon as possible but in no case later than one year from identification.

Percent = b divided by a times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

B. Percent of noncompliance related to areas not included in the above monitoring priority areas and indicators corrected within one year of identification:

- a. Number of findings of noncompliance made related to such areas.
- b. Number of corrections completed as soon as possible but in no case later than one year from identification.

Percent = b divided by a times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

C. Percent of noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.) corrected within one year of identification:

- a. Number of EIS programs in which noncompliance was identified through other mechanisms.
- b. Number of findings of noncompliance made.
- c. Number of corrections completed as soon as possible but in no case later than one year from identification.

Percent = c divided by b times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

### Overview of Issue/Description of System or Process:

Missouri has implemented a revised system of monitoring for all general supervision requirements for Part C. Compliance monitoring is a significant component of this system, but general supervision encompasses other areas, such as public awareness, professional development, financial management, and interagency agreements.

**General Supervision Components in place during 2004-05:**

- SPOE and intake coordinator monitoring for referral process, intake, evaluation, eligibility determination and initial IFSP development
- Department of Mental Health Regional Center monitoring for IFSP implementation
- Contracts and provider agreements for SPOEs and providers
- Interagency agreements for service coordination and child find
- Central Finance Office (CFO), claims and billing system, Explanation of Benefits (EOB) to families
- Family surveys (annual and exit)
- Complaint system for child complaints, provider complaints and service complaints arising from EOB statements
- Investigation of questionable billing/authorizations for services including potential fraudulent billing
- Enrollment, training and credentialing requirements for providers
- SPOE child data system
- Additional provider and ongoing service coordinator monitoring activities
- Regular general supervision data reviews
- IFSP Quality Indicators Rating Scale piloted

**Compliance Monitoring Activities:**

In addition to the ongoing compliance monitoring which occurs through monthly and quarterly data review sessions and the complaint system, on-site compliance monitoring of SPOEs, service coordinators, and providers took place in 2004-2005. Since inception of the redesigned Part C program in 2002, onsite monitoring reviews for SPOEs have taken place based on the various implementation dates of the SPOE contracts. Therefore, selection was based on length of operation in order to assess start-up operations rather than any sort of representative sample of the state. When all regions are under the new contract structure in early 2006, a three-year monitoring review cycle will be put in place.

Initial monitoring was conducted in January/February 2005 for the two new agencies awarded SPOE contracts in July 2004. Follow-up monitoring was conducted between June and August 2005 with the remaining 21 SPOEs (16 SPOE/Agency groupings) in the state that had initial reviews during 2003-04.

Significant changes in monitoring for 2004-05 included the following:

- Monitoring of ongoing service coordinators (Department of Mental Health service coordinators beginning February 2005 and independent service coordinators beginning June 2005)
- Monitoring of early intervention providers beginning June 2005
- Implementing requirement for correction of individual child non-compliance
- Requiring SPOEs, independent service coordinators and Service Providers to submit Corrective Action Plans for any identified areas of non-compliance
- Use of First Steps Consultants to provide technical assistance to agencies prior and subsequent to monitoring to ensure procedural compliance
- For any entities monitored that failed to correct non-compliance within one year, enforcement actions initiated depending on issues to be resolved and past record of non-compliance
- Initiation of procedures to invoke sanctions for agencies unwilling or unable to correct non-compliance

The monitoring process for 2004-05 included the following:

- Reviews of individual child records
- Interviews of SPOE staff, service coordinators, parents, and providers
- Data reviews for 45 day timelines
- SPOEs, DMH, independent service coordinators, and providers received final report letters with requirements for corrective action plans and, in some cases, Assurance Statements and requirements to correct individual child non-compliance
- First Steps Regional Consultants assist SPOEs, DMH, service coordinators, and providers, as needed with guidance on compliance and corrective action plans.

**Correction of Non-Compliance:**

Individual Child Non-Compliance: SPOEs, service coordinators, and providers are given copies of the checklists completed at the time of file review and required to correct individual child non-compliance (as appropriate) within 60 days.

Systemic Non-Compliance: Systemic non-compliance is generally defined as less than 80% compliance on any indicator based on a sample percentage of files reviewed. One exception is that 100% compliance is required for convening initial IFSP meetings within 45 days of the referral date.

When non-compliance is identified at the initial monitoring review, a follow-up review is scheduled for approximately nine months after the date of the final report letter. First Steps Consultants provide technical assistance regarding development and implementation of Corrective Action Plans between the initial monitoring review and follow-up review.

If non-compliance persists in any areas at the time of the follow-up review, a second follow-up review is scheduled for a time within approximately two months of the first follow-up review. Technical assistance by the First Steps Consultants is intensified to assist in correcting non-compliance. If compliance is not achieved, sanctions may be imposed.

If non-compliance persists in any areas at the time of the first follow-up review, enforcement actions are taken, including, but not limited to:

- Submission of frequent progress reports as required by DESE
- Implementation of specific procedures as ordered by DESE
- Procedures prescribed in the Interagency Agreement between DESE and DMH central offices if correction is not accomplished by DMH service coordinators

For those entities that are unwilling or unable to rectify non-compliance issues within a reasonable period of time after enforcement actions have been taken and/or where persistent non-compliance exists, actions may be initiated to invoke sanctions as described below.

**Sanctions:**

DESE, as the Part C Lead Agency and because of the organization of the Part C system in Missouri, is ultimately responsible for ensuring that compliance with Part C requirements is met. Other entities in the Part C system (SPOEs, Independent Service Coordinators and Independent Service Providers) operate under contractual agreements with the state agency. As these entities are the “frontline” for implementing requirements on a daily basis, enforcement actions are outlined in the SPOE contracts and can be taken to rectify problems if procedures are not followed. These enforcement actions include liquidated damages or cancellation of contracts.

**Future Plans for Compliance Monitoring:**

Beginning in early 2006 when the new contracts are in place, the ten SPOEs will be placed on a three year cycle for compliance monitoring review. This review process will address compliance for all intake and ongoing service coordinators, SPOE administration, and service providers in the region and will:

- Verify compliance by reviewing a sampling of source documents not available in the child data system (e.g. Prior Written Notices, Evaluation Reports)
- If deemed necessary, a comprehensive review of all compliance indicators through a self-assessment process conducted by each SPOE and verification of compliance calls by DESE staff with assistance from First Steps Regional Consultants
- Specifically target areas of concerns identified through the systematic data review process.

Off-schedule reviews to target specific issues will be conducted as needed based on areas identified through the data review process and/or spot checks of data that are available through the web-based child data system. These will be conducted by desk review, if practical, based on the areas being reviewed, and if not practical, an on-site review will be conducted. Corrective actions and sanctions will continue to be in place as described above.

In order to ensure correction of noncompliance from the previous SPOE configuration, DESE will follow the same steps as used when new contracts were awarded in the July 2004 SPOE rebid. DESE will send

letters to and meet with all new contractors to review previous compliance findings and develop a plan for correction with each SPOE. Consultants will review and evaluate the implementation of the plan and correction of noncompliance on a monthly basis.

#### **Future Compliance Monitoring within the Context of Missouri's General Supervision Procedures**

Missouri DESE recognizes that general supervision responsibilities encompass more than compliance monitoring and the complaint system. Procedures have been developed and are continuing to be refined for using the comprehensive data system available in Missouri to assist with oversight of all areas of general supervision: Monitoring, Public Awareness, Comprehensive System of Professional Development, Complaint System, Data Collection, Financial Management, and Interagency Agreements.

These separate pieces overlap in many ways, and the areas were integrated by:

- Developing a procedures manual for each area of general supervision
- Developing a systematic data review process that covers areas of compliance and additional areas targeted by the SPP that can appropriately be addressed by data review. Data reviews began January 2005. DESE staff and Consultants participate to help ensure an integrated approach. The process also allows for review of issues that have come in through informal channels.

Missouri is continuing to work with the National Center for Special Education Accountability Monitoring (NCSEAM) and identified stakeholders in refining the state's General Supervision system and moving forward with focused monitoring to systematically address performance outcomes.

#### **Baseline Data for FFY 2004 (2004-2005):**

##### **A. Monitoring related to Monitoring Priority Areas and Indicators**

<b>SPP Indicator</b>	<b># SPOE/ Agencies Reviewed 2003-04</b>	<b># SPOE/ Agencies with Findings 2003-04</b>	<b># Findings in SPOE/ Agencies 2003-04</b>	<b># Corrected within 1 Year</b>	<b>% Corrected within 1 Year</b>
1. EI services in timely manner	16	3	3	3	100.0%
2. EI services in natural environments	16	1	1	1	100.0%
3. Outcomes	New – No data				
4. Families	New – No data				
5. Percent birth to 1*	None				
6. Percent birth to 3*	None				
7. 45 day timelines	16	12	12	4	33.3%
8. Transition (3 Indicators)	14	13	39	25	64.1%
Total			55	33	60.0%

\* Child find was not a specific contractual responsibility for SPOEs monitored during 2003-2004. Child find responsibilities are included in the new contracts. See Indicator 5 for more information.

**B. Monitoring Not Related to Monitoring Priority Areas and Indicators:**

Topic	# SPOE/ Agencies Reviewed 2003-04	# SPOE/ Agencies with Findings 2003-04	# Findings in SPOE/ Agencies 2003-04	# Corrected within 1 Year	% Corrected within 1 Year
Referral Process	16	10	18	17	94.4%
Evaluation/Assess Procedures	16	12	17	12	70.6%
IFSP	16	11	25	24	96.0%
Total			60	53	88.3%

Referral Process includes checking that written notice was provided, that the notice contained the appropriate content and that parental consent was obtained prior to the evaluation of the child.

Evaluation/Assessment Procedures includes checking that current health records and medical histories are present and that the basis for determination of eligibility and need for EI services is present.

IFSP includes checking that written notification was provided, that the required meeting participants participated, that the services to be provided are described, that required transition elements are addressed, that an annual meeting to evaluate the IFSP was held, the six month review if the IFSP occurs, and that prior written notice is provided for change of services.

**C. Child complaint data**

Child Complaint Allegation Topic	# Findings in 2003-04	# Corrected within 1 Year	% Corrected within 1 Year
Evaluations	1	1	100%
FERPA	1	1	100%
IFSP	2	2	100%
Provision of Procedural Safeguards	1	1	100%
Referral	2	2	100%
Special Education and Related Services	1	1	100%
Transition	1	1	100%
Total	9	9	100%

**Discussion of Baseline Data:**

Corrective action plans were ordered for all SPOEs found out of compliance in any of these areas during 2003-04 initial reviews. At the follow-up review, some noncompliance was not cleared as indicated in the tables above.

Two SPOEs have each corrected two transition indicators; however that data is not reflected in the above tables because the correction occurred two months beyond the one-year point. In addition, the review for two other SPOEs will not be completed until approximately mid-December, and it is possible DESE will be able to verify correction of non-compliance in the areas of transition, evaluation/assessment, and IFSP that has occurred either within one year or shortly beyond one year.

Two SPOEs could not be reviewed in the area of Evaluation/Assessment procedures (basis for eligibility) because they are small SPOEs and had not received referrals in the eligibility categories necessary to



review in order to verify correction of non-compliance. Due to this, these SPOEs are considered not cleared, but will be reviewed as soon as the necessary files are available.

The level of non-compliance in SPOEs was considered when awarding contracts for new SPOEs during the bid review and selection process. The new contractors will be notified through letters and direct contact from DESE regarding any areas of noncompliance still outstanding from previous SPOE agencies covering the new areas. The new contractors will be held responsible for the correction of any remaining noncompliance. Consultants will work closely with the new SPOEs and begin monitoring to verify completion as soon as the SPOEs are operational. New SPOE directors will participate in training in conjunction with start up operations and the compliance portion of the training will focus heavily on areas of noncompliance identified throughout the state.

Existing SPOE contractors that continue to operate SPOEs where non-compliance has not completely been corrected will also receive compliance training and technical assistance with special emphasis on areas of concern identified through monitoring.

Training for all SPOE directors (new and existing) is scheduled for January 2006, and ongoing compliance training and technical assistance will be provided, especially to SPOEs that continue to show non-compliance in one or more areas. Consultants will work with DESE to conduct ongoing monitoring to verify correction of any areas of non-compliance remaining. DESE will receive regular reports (at least monthly) from consultants in areas where non-compliance has not yet been corrected.

In general, DESE is aware that 45 day timelines is one area that needs attention and has put into place a number of changes with the new SPOE contract that are anticipated to help, along with placing high emphasis on this area through regular data reviews, technical assistance, targeted problem solving, and increased reporting requirements where appropriate. In addition, DESE recognizes that there are several areas of the state that continue to have difficulty with transition, and this is a targeted area for training and technical assistance. Beyond that, many SPOEs have corrected all non-compliance or have only minimal issues they are dealing with and they should be able to correct these in a reasonable period. DESE has identified three SPOE regions that have more significant problems, all of which will have new contractors.

DESE has closely reviewed results of monitoring and complaints and is in the process of working with the Consultants to revise technical assistance, training and procedure documents. The revised documents will incorporate specific information to target areas of systemic noncompliance.

<b>FFY</b>	<b>Measurable and Rigorous Targets</b>
<b>All Years</b>	100% of noncompliance will be corrected as soon as possible but in no case later than one year from identification

#### **Improvement Activities/Timelines/Resources:**

<b>Improvement Activities</b>	<b>Timelines</b>	<b>Resources</b>
Develop self-assessment process	2006-07	LA staff, consultants
Revise sanctions in state regulations and provider contracts	2006-07	LA staff
Deploy consultants to specific SPOEs or providers based on data reviews and other information	2005-2011	Consultants
Contract for web-based monitoring management system	Spring 2006	LA staff
Implement web-based system for monitoring and self-assessment purposes	Summer 2006	LA staff
Fully implement IFSP Quality Indicators Rating Scale to assess quality as well as procedural compliance	2006-2011	LA Staff

## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

#### Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator 10:** Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint. (20 U.S.C. 1416(a)(3)(B) and 1442)

#### Measurement:

Percent =  $(1.1(b) + 1.1(c))$  divided by  $(1.1)$  times 100.

### Overview of Issue/Description of System or Process:

A child complaint may be filed by any individual or organization that believes there has been a violation of any state or federal regulation implementing the IDEA Part C system. The complaint must be filed in writing with the Department of Elementary and Secondary Education, Division of Special Education, unless it is determined that the requirement to file in writing effectively denies the individual the right to file the complaint.

Child complaints are investigated by a staff member of the Division of Special Education. Decisions are issued by the Commissioner of Education within sixty (60) days of the receipt of the complaint, unless it is determined that a longer period is necessary due to exceptional circumstances that exist with respect to a particular complaint, in which case an extension is made. In resolving a complaint in which it is found that a Responsible Public Agency is out of compliance, the Department addresses within its decision how to remediate the compliance violation. If needed, technical assistance activities and negotiations are undertaken.

If a written complaint is received that is also the subject of a due process hearing or contains multiple issues of which one or more are part of that hearing, the part(s) of the complaint that are being addressed in the due process hearing are set aside until the conclusion of the hearing.

Missouri has had a database for child complaint and due process information for several years. The database is used to track timelines for resolution of child complaints.

#### Baseline Data for FFY 2004 (2004-2005):

During 2004-05, eleven (11) child complaints were filed, of which ten (10) were investigated and one (1) was withdrawn. All decisions were issued within 60 calendar days.

#### Discussion of Baseline Data:

Missouri has historically been within timelines for all child complaints.

FFY	Measurable and Rigorous Targets
All Years	100% of signed written complaints with reports issued will be resolved within 60-day timeline or a timeline extended for exceptional circumstances

### Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Maintain current procedures to ensure continued compliance	2005-2011	LA Staff

## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

#### Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator 11:** Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.  
(20 U.S.C. 1416(a)(3)(B) and 1442)

#### Measurement:

Percent = (3.2(a) + 3.2(b)) divided by (3.2) times 100.

### Overview of Issue/Description of System or Process:

The Due Process Hearing system in the State of Missouri is a one-tier system consisting of a single Hearing Officer for Part C. The Part C Hearing Officers are attorneys under contract with the State of Missouri. Requests for a Due Process Hearing must be made in writing to the Department of Elementary and Secondary Education, Division of Special Education. Upon receipt of a request for a hearing, both parties are offered the opportunity for mediation. Both parties must agree to enter into mediation and agree on a trained mediator from a list that is provided. If mediation is successful, a written agreement is developed. All discussions during mediations are confidential and may not be used in any subsequent due process hearings or civil proceedings. If either party does not agree with the hearing decision, they may appeal the findings and decision in either state or federal court. The decision of the Due Process Hearing Officer is a final decision, unless a party to the hearing appeals.

Missouri has had a database for child complaint and due process information for several years. The database is used to track timelines for due process hearing requests.

### Baseline Data for FFY 2004 (2004-2005):

During 2004-05, two due process hearing requests were received. Both had decisions issued within appropriately extended timelines.

### Discussion of Baseline Data:

Missouri has historically been within timelines for all due process hearings.

FFY	Measurable and Rigorous Target
All Years	100% of fully adjudicated due process hearing requests will be fully adjudicated within the applicable timeline

### Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Maintain current procedures to ensure continued compliance	2005-2011	LA Staff

## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

### Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator 12:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted). (20 U.S.C. 1416(a)(3)(B) and 1442)

#### Measurement:

Percent = 3.1(a) divided by (3.1) times 100.

### Overview of Issue/Description of System or Process:

Missouri did not adopt Part B due process procedures for Part C.

### Baseline Data for FFY 2004 (2004-2005):

Not applicable

### Discussion of Baseline Data:

Not applicable

FFY	Measurable and Rigorous Targets
All Years	Not applicable

### Improvement Activities/Timelines/Resources:

Not applicable

## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

#### Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator 13:** Percent of mediations held that resulted in mediation agreements.  
(20 U.S.C. 1416(a)(3)(B) and 1442)

#### Measurement:

Percent = (2.1(a)(i) + 2.1(b)(ii)) divided by (2.1) times 100.

### Overview of Issue/Description of System or Process:

See Indicator 11. These data are collected in the child complaint/due process database.

#### Baseline Data for FFY 2004 (2004-2005):

There were no mediations requests during 2004-05.

#### Discussion of Baseline Data:

No mediations have been held in Missouri during the past three years.

FFY	Measurable and Rigorous Targets
All Years	No targets are set due to lack of baseline data.

### Improvement Activities/Timelines/Resources:

Improvement Activities	Timelines	Resources
Maintain well-trained mediators	2005-2011	LA Staff
Provide parents and SPOEs with written information about mediation	2006-2011	LA Staff, SPOEs

## Part C State Performance Plan (SPP) for 2005-2010

### Overview of the State Performance Plan Development:

See Indicator 1

#### Monitoring Priority: Effective General Supervision Part C / General Supervision

**Indicator 14:** State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.  
(20 U.S.C. 1416(a)(3)(B) and 1442)

#### Measurement:

State reported data, including 618 data, State performance plan, and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring accuracy).

### Overview of Issue/Description of System or Process:

Missouri implemented the new web-based child data system in the summer of 2005. This system captures virtually every data element in the Part C system and contains information from referral, eligibility determination and IFSP development. The system is compliance-driven and requires critical data items and conducts edit checks on data to help ensure accuracy. The new system will supply a large amount of data that can be reviewed at the SPOE and state levels for program evaluation and monitoring purposes.

The majority of children with IFSPs will be transferred to the web system, but children who will exit the Part C program prior to September 2006 can remain in the old SPOE software. Therefore, data from the two software products will have to be integrated for state and SPOE level reports until such a time when no children remain in the old software.

Various efforts have been made to ensure the accuracy of data entered by the SPOEs into the data system:

- Each SPOE is the electronic record-keeper for the children served in their area. System requirements demand accurate and timely data entry at the child level in order for the children to have valid authorizations for services.
- Twice a month the CFO sends to DESE an up-to-date superSPOE database that contains child and family data including demographics and eligibility, IFSP information and service authorization data, among other items. This database is used to aggregate and disaggregate data through Access queries for federal reporting purposes, and data is monitored for irregularities through various query results. The web system contains a report server from which DESE will be able to query data. This report server will eventually eliminate the need for the twice-monthly superSPOE database.
- Various data reports are posted on the web monthly. These reports contain child counts, referral timelines, IFSP and inactivation data by SPOE, among others. Posting this report has encouraged more accurate data entry.
- Technical assistance from the CFO Help Desk supports more accurate data entry.
- Data is being used for monitoring for
  - Determining which SPOEs to monitor on-site
  - File selection and data verification on-site
  - Desk reviews for SPOE monitoring as well as regular data reviews
  - Referring consultants to work with SPOEs, service coordinators and providers on specific issues
  - Fiscal data reviews and investigations

**Baseline Data for FFY 2004 (2004-2005):**

All 618 data reports and annual performance reports have been submitted on or before due dates. Accuracy of data is ensured through the efforts described above, the most important being the source document reviews during on-site monitoring, publication of the data and investigation of questionable data.

**Discussion of Baseline Data:**

Missouri's new web-based child data system contains virtually all elements of the First Steps process from referral through IFSP. The electronic record is now considered the official Early Intervention record for a child and reviews will include checking the electronic data against source documents.

<b>FFY</b>	<b>Measurable and Rigorous Targets</b>
<b>All Years</b>	100% of State reported data will be timely and accurate

**Improvement Activities/Timelines/Resources:**

<b>Improvement Activities</b>	<b>Timelines</b>	<b>Resources</b>
Continue data review process to target technical assistance and improve accountability for data entered in the child data system	2005-2011	LA Staff, Consultants
Continue to review and improve data verification process	2005-2011	LA Staff, Consultants

## Attachment 1

### Report of Dispute Resolution Under Part C of the Individuals with Disabilities Education Act Complaints, Mediations, Resolution Sessions, and Due Process Hearings

SECTION A: Signed, written complaints	
(1) Signed, written complaints total	11
(1.1) Complaints with reports issued	10
(a) Reports with findings	5
(b) Reports within timeline	10
(c) Reports within extended timelines	0
(1.2) Complaints withdrawn or dismissed	1
(1.3) Complaints pending	0
(a) Complaints pending a due process hearing	0

SECTION B: Mediation requests	
(2) Mediation requests total	0
(2.1) Mediations	
(a) Mediations related to due process	0
(i) Mediation agreements	0
(b) Mediations not related to due process	0
(i) Mediation agreements	0
(2.2) Mediations not held (including pending)	0

SECTION C: Hearing requests	
(3) Hearing requests total	2
(3.1) Resolution sessions	N/A
(a) Settlement agreements	N/A
(3.2) Hearings (fully adjudicated)	2
(a) Decisions within timeline (45 day)	0
(b) Decisions within extended timeline	2
(3.3) Resolved without a hearing	0



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